

## UNITED STATES BANKRUPTCY COURT, WESTERN DISTRICT OF WISCONSIN

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**CHAPTER 13 PLAN (Individual Adjustment of Debts)**

☒ Original Plan  
☐ Amended Plan (Indicate 1st, 2nd, etc. Amended, if applicable)  
☐ Modified Plan (Indicate 1st, 2nd, etc. Modified, if applicable)

DEBTOR: Eli Randall JOINT DEBTOR: \_\_\_\_\_ CASE NO.: 3-18-11706  
 SS#: xxx-xx-3702 SS#: \_\_\_\_\_

**I. NOTICES**

To Debtors: Plans that do not comply with local rules and judicial rulings may not be confirmable. All plans, amended plans and modified plans shall be served upon all creditors and a certificate of service filed with the Clerk pursuant to Local Rules 3015-1, 3015-2, and 3015-3.

To Creditors: Your rights may be affected by this plan. You must file a timely proof of claim in order to be paid. Your claim may be reduced, modified or eliminated.

To All Parties: The plan contains no nonstandard provisions other than those set out in paragraph VIII. Debtor(s) must check one box on each line listed below in this section to state whether the plan includes any of the following:

The valuation of a secured claim, set out in Section III, which may result in a partial payment or no payment at all to the secured creditor	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included
Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section III	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included
Nonstandard provisions, set out in Section VIII	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not included

TO ALL PARTIES:

**Unless otherwise provided for in this plan, the Trustee shall disburse payments in the following order: administrative expenses including trustee and attorney fees, secured claims, priority claims, general unsecured claims.**

**II. PLAN PAYMENTS, LENGTH OF PLAN AND DEBTOR(S)' ATTORNEY'S FEE**

**A. MONTHLY PLAN PAYMENT:** This Plan pays for the benefit of the creditors the amounts listed below, including trustee's fees beginning 30 days from the filing/conversion date. Debtor(s) will make payments by employer wage order, unless otherwise specified herein. The payments must be made for the Applicable Commitment Period, either 36 or 60 months, or for a shorter period that is sufficient to pay allowed nonpriority unsecured claims in full.

1. \$ 2500 for 60 months;The total amount of estimated payments to the trustee: **\$150,000.00****B. DEBTOR(S)' ATTORNEY'S FEE:** ☐ NONE ☐ PRO BONO

Total Fees: <b>\$5,000.00</b>	Total Paid: <b>\$1,000.00</b>	Balance Due: <b>\$4,000.00</b>
Payable _____/month (Months _____ to _____)		

**III. TREATMENT OF SECURED CLAIMS****A. SECURED CLAIMS:** ☐ NONE

[Retain Liens pursuant to 11 U.S.C. §1325(a)(5)] Mortgage(s)/Lien on Real or Personal Property:

1	Creditor: <b>Seterus</b>	
	Address: <b>P.O. Box 1077; Hartford, CT 06143-1077</b>	Arrearage/Payoff on Petition Date <b>125,000.00</b>
		Arrearage - Paid Pro Rata <b>0.0% interest</b>
	Account No.: _____	
	Other: _____	
	<input type="checkbox"/> Real Property	Check one below for Real Property:
	<input type="checkbox"/> Principal Residence	<input type="checkbox"/> Escrow is included in the regular payments

Debtor(s): **Eli Randall** Case number: **3-18-11706**

<input type="checkbox"/> Other Real Property Address of Collateral: _____	<input type="checkbox"/> The debtor(s) will pay <input type="checkbox"/> taxes <input type="checkbox"/> insurance directly
<input type="checkbox"/> Personal Property/Vehicle Description of Collateral: _____	
<b>2</b> Creditor: _____ Address: _____ Arrearage/Payoff on Petition Date _____  Account No.: _____ Other: _____ <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><input type="checkbox"/> Real Property <div style="margin-left: 20px;"><input type="checkbox"/> Principal Residence <input type="checkbox"/> Other Real Property</div></div><div style="width: 45%;">Check one below for Real Property: <input type="checkbox"/> Escrow is included in the regular payments <input type="checkbox"/> The debtor(s) will pay <input type="checkbox"/> taxes <input type="checkbox"/> insurance directly</div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;">Address of Collateral: _____</div><div style="width: 45%;"></div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><input type="checkbox"/> Personal Property/Vehicle Description of Collateral: _____</div><div style="width: 45%;"></div></div>	
<b>3</b> Creditor: _____ Address: _____ Arrearage/Payoff on Petition Date _____  Account No.: _____ Other: _____ <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><input type="checkbox"/> Real Property <div style="margin-left: 20px;"><input type="checkbox"/> Principal Residence <input type="checkbox"/> Other Real Property</div></div><div style="width: 45%;">Check one below for Real Property: <input type="checkbox"/> Escrow is included in the regular payments <input type="checkbox"/> The debtor(s) will pay <input type="checkbox"/> taxes <input type="checkbox"/> insurance directly</div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;">Address of Collateral: _____</div><div style="width: 45%;"></div></div> <div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><input type="checkbox"/> Personal Property/Vehicle Description of Collateral: _____</div><div style="width: 45%;"></div></div>	

**B. VALUATION OF COLLATERAL:** ☒ NONE

IF YOU ARE A SECURED CREDITOR LISTED BELOW, THE PLAN SEEKS TO VALUE THE COLLATERAL SECURING YOUR CLAIM IN THE AMOUNT INDICATED, A SEPARATE MOTION WILL ALSO BE SERVED UPON YOU PURSUANT TO BR 7004 AND LR 3015-1.

**C. LIEN AVOIDANCE** ☒ NONE

**D. SURRENDER OF COLLATERAL:** Secured claims filed by any creditor granted stay relief in this section shall not receive a distribution from the Chapter 13 Trustee.

☒ NONE

☐ The debtor(s) elect to surrender to each secured creditor listed below the collateral that secures the creditor's claim. The debtor(s) request that upon confirmation of this plan the automatic stay be terminated in rem as to the debtor(s) and in rem and in personam as to any codebtor(s) as to these creditors.

☐ Other:

**E. DIRECT PAYMENTS:**

☐ NONE

☒ The debtor(s) elect to make current payments directly to each secured creditor listed below. Nothing herein is intended to terminate or abrogate the debtor(s)' state law contract rights.

Name of Creditor	Account No.	Description of Collateral (Address, Vehicle, etc.)
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Debtor(s): **Eli Randall** Case number: **3-18-11706**

	Name of Creditor	Account No.	Description of Collateral (Address, Vehicle, etc.)
1.	<b>Mark Weldy</b>	both notes on farm land	<b>Fox Lake WI 53626</b> <b>Value Based on Debtor's Belief</b>
2.	<b>Seterus</b>	homestead	<b>5858 W. Waveland Ave Chicago, IL 60634 Cook County</b> <b>Value Based on Debtor's Belief of Fair Market Value</b>

**IV. TREATMENT OF FEES AND PRIORITY CLAIMS** [as defined in 11 U.S.C. §507 and 11 U.S.C. §1322(a)(4)]

**A. ADMINISTRATIVE FEES OTHER THAN DEBTORS(S)' ATTORNEY'S FEE:** ☒ NONE

**B. PRIORITY TAX CLAIMS:** ☒ NONE

**C. DOMESTIC SUPPORT OBLIGATION(S):** ☒ NONE ☐ CURRENT AND PAID OUTSIDE

**D. OTHER:** ☒ NONE

**V. TREATMENT OF UNSECURED NONPRIORITY CREDITORS**

**A.** Pay \_\_\_\_\_/month

Pro rata dividend will be calculated by the Trustee upon review of filed claims after bar date.

**B.** ☐ If checked, the Debtor(s) will amend/modify to pay 100% to all allowed unsecured nonpriority claims.

**C. SEPARATELY CLASSIFIED:** ☒ NONE

**VI. EXECUTORY CONTRACTS AND UNEXPIRED LEASES:** Secured claims filed by any creditor/lessor granted stay relief in this section shall not receive a distribution from the Chapter 13 Trustee.

☒ NONE

**VII. INCOME TAX RETURNS AND REFUNDS:** ☒ NONE

**VIII. NON-STANDARD PLAN PROVISIONS:** ☒ NONE

**PROPERTY OF THE ESTATE WILL VEST IN THE DEBTOR(S) UPON PLAN CONFIRMATION.**

I declare that the foregoing chapter 13 plan is true and correct under penalty of perjury.

/s/ Wade M. Pittman

**Wade M. Pittman 1090712**

Attorney with permission to sign on Debtor(s)' behalf

**May 25, 2018**

Date

/s/ Eli Randall

Debtor

**May 25, 2018**

**Eli Randall**

Date

/s/ Wade M. Pittman

**Wade M. Pittman 1090712**

Attorney with permission to sign on Debtor(s)' behalf

**May 25, 2018**

Date

By filing this document, the Attorney for Debtor(s) or Debtor(s), if not represented by counsel, certifies that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Local Form Chapter 13 Plan and the plan contains no nonstandard provisions other than those set out in paragraph VIII.